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APPLICANTS

Mark D. Basile, Grosse Pointe, MI;
 Ralph J. Basile, Sterling Heights, MI;
 Steven J. Basile, Grosse Pointe Woods, MI;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **
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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	STATE OR COUNTRY MI	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 3
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ADDRESS
 22045
 BROOKS KUSHMAN P.C.
 1000 TOWN CENTER
 TWENTY-SECOND FLOOR
 SOUTHFIELD, MI
 48075

TITLE
 Method and system to represent a temperature experienced by a medical device in a medical washing machine

FILING FEE RECEIVED 375	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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